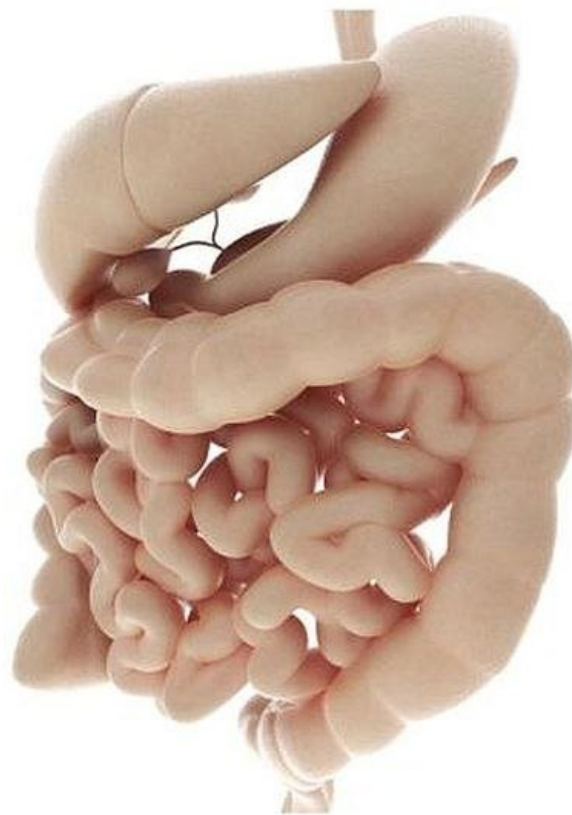


ACG: diphenhydramine ups sedation in chronic opioid users

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(HealthDay)—For patients using chronic opioids, use of

diphenhydramine in addition to conventional sedatives appears to decrease pain and is associated with improved sedation during colonoscopy, according to a study presented at the World Congress of Gastroenterology, being held in partnership with the American College of Gastroenterology's annual scientific meeting and postgraduate course Oct. 13 to 18 in Orlando, Florida.

Salman Nusrat, M.D., from the University of Oklahoma Health Sciences Center in Oklahoma City, and colleagues conducted a randomized, double-blind study involving patients using chronic opioids who were scheduled to undergo [colonoscopy](#). Participants were randomly allocated to receive diphenhydramine (61 participants) or placebo (58 participants) at the start of the procedure.

The researchers found that there was no difference between the groups in the amount of fentanyl and midazolam used ($P = 0.88$ and $P = 0.79$). The mean [sedation](#) scores were statistically significant in favor of the diphenhydramine group as judged by the physician ($P = 0.0002$) and nurses ($P = 0.04$). Patient scores favored diphenhydramine for pain ($P = 0.047$) and amnesia ($P = 0.047$). No significant difference was seen between the groups in qualitative assessment. No statically significant differences were seen in induction time ($P = 0.86$), procedure duration ($P = 0.98$), or recovery times ($P = 0.16$).

"Our results showed that use of [diphenhydramine](#) in addition to conventional sedatives decreases [pain](#) and improves quality of sedation during colonoscopy," Nusrat said in a statement.

More information: [Abstract](#)
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